



Columbus Civil Service Commission  
50 West Gay Street, Room 600  
Columbus, Ohio 43215

## Request to Withdraw from Selection Process

In order to withdraw from the selection process, you must complete this form and submit it to the Civil Service Commission.

**Be sure to complete all the information requested below. Please print clearly.**

Social Security Number: \_\_\_\_\_

Name: \_\_\_\_\_  
(Last) (First) (Middle)

Address: \_\_\_\_\_

Applicant for the position of: \_\_\_\_\_

Grade Band or Rank on Eligible List: \_\_\_\_\_

I am presently an applicant for the position indicated above and I am requesting that:

- ☐ My name is **temporarily withdrawn** from the selection process according to Civil Service Rule VIII(E), until I further notify the Civil Service Commission or, if my name is on an eligible list, the expiration of the eligible list.
- I understand that I shall not be certified for possible appointment until I have completed all steps of the selection process and that as a result of this temporary withdrawal, my consideration for appointment to a position may be delayed. I further understand that the temporary withdrawal may even result in my failure to be considered for appointment. Finally, I understand that upon re-entry into the process, I will be scheduled for the next available phase of the selection process.
  - I understand that each eligible applicant is permitted only one temporary withdrawal during the life of the eligible list.
  - I understand that in the event that I choose to re-enter the selection process, it is my responsibility to notify the Certification Unit, Civil Service Commission, in writing, at 50 West Gay Street, 6<sup>th</sup> Floor, Columbus, Ohio 43215 or to fax my request to the Civil Service Commission at 614/645-8334.
- ☐ My name is **permanently removed** from further consideration for the above position pursuant to Civil Service Commission Rule VIII(E).
- I understand that once I have permanently withdrawn from the application or selection process, my name will not be considered or processed further.
  - I further understand that I will not be certified for possible appointment and I may not re-enter the selection or certification process.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

### FOR CIVIL SERVICE COMMISSION USE ONLY

Date Division Notified: \_\_\_\_\_  
Month Day Year Initials: \_\_\_\_\_